

FACSIMILE COVER SHEET**AKA CHAN LLP**

900 Lafayette Street, Suite 710
Santa Clara, CA 95050
Tel: 408-701-0035
Fax: 408-608-1599

RECEIVED
CENTRAL FAX CENTER

MAY 12 2005

CONFIDENTIALITY NOTE

The information contained in this facsimile (FAX) message is legally privileged and confidential information intended only for the use of the receiver or firm named below. If the reader of this message is not the intended receiver, you are hereby notified that any dissemination, distribution or copy of this FAX is strictly prohibited. If you have received this FAX in error, please immediately notify the sender at the telephone number provided above and return the original message to the sender at the address above via the United States Postal Service. Thank you.

Date: May 12, 2005

To: Examiner: Catherine M. Colon
Group Art Unit: 3623

Fax No.: (703) 872-9306

Re: U.S. Patent Application No. 09/709,211
Filed: November 9, 2000
Applicants: GREGG WILLIAMS
Docket No: 020508-000100US
Attorney: Melvin D. Chan

Attached:

- 1) Power of Attorney and Correspondence Address Indication Form (1 pg);

Total Pages (including cover sheet) 2

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile (703-872-9306) to the U.S. Patent and Trademark Office on May 12, 2005

Signed: _____

Karen A. Hallock
Karen A. Hallock

****PLEASE CONFIRM RECEIPT OF THIS FACSIMILE BY RETURN FACSIMILE****

RECEIVED
CENTRAL FAX CENTER

MAY 12 2005

PTO/SB/81 (11-04)

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	09/709,211
	Filing Date	November 9, 2000
	First Named Inventor	Gregg Williams
	Title	SUBSCRIPTION MEMBERSHIP MARKETING APPLICATION FOR THE INTERNET
	Art Unit	3623
	Examiner Name	Catherine M. Colon
	Attorney Docket Number	020508-000100US

I hereby revoke all previous powers of attorney given in the above identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 51111

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

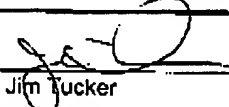
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone			

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature		Date	5/5/05
Name	Jim Tucker	Telephone	415-352-2368
Title and Company	CEO, Integrated Marketing Technology		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

11156748 v1